

In re **Leroy Alan Jones**
218-76-8898

Terri Lynn Jones
566-08-8496

Case No. 98-02822

AMENDED SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

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Debtor's Marital Status: Married	DEPENDENT'S OF DEBTOR AND SPOUSE		
Debtor's Age: Spouse's Age:	NAMES Randy Williams Louis Jones Jennifer Williams Ryan Jones	AGE 15 13 12 8	RELATIONSHIP Son Son Daughter Son
EMPLOYMENT:	DEBTOR	SPOUSE	
Occupation	Mechanic Leadman	Cleaning	
How long employed	19 years, 4 months		
Name and Address of Employer	4600 Apple Boise ID 83706		

	DEBTOR	SPOUSE
Income: (Estimate of average monthly income)		
Current monthly gross wages, salary, and commissions (pro rate if not paid monthly.)	\$ <u>2,720.00</u>	\$ <u>0.00</u>
Estimated monthly overtime	\$ <u>0.00</u>	\$ <u>0.00</u>
SUBTOTAL	\$ <u>2,720.00</u>	\$ <u>0.00</u>
LESS PAYROLL DEDUCTIONS		
a. Payroll taxes and social security	\$ <u>916.00</u>	\$ <u>0.00</u>
b. Insurance	\$ <u>0.00</u>	\$ <u>0.00</u>
c. Union dues	\$ <u>0.00</u>	\$ <u>0.00</u>
d. Other (Specify) _____	\$ <u>0.00</u>	\$ <u>0.00</u>
SUBTOTAL OF PAYROLL DEDUCTIONS	\$ <u>916.00</u>	\$ <u>0.00</u>
TOTAL NET MONTHLY TAKE HOME PAY	\$ <u>1,804.00</u>	\$ <u>0.00</u>
Regular income from operation of business or profession or farm (attach detailed statement)	\$ <u>0.00</u>	\$ <u>2,375.00</u>
Income from real property	\$ <u>0.00</u>	\$ <u>0.00</u>
Interest and dividends	\$ <u>0.00</u>	\$ <u>0.00</u>
Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.	\$ <u>0.00</u>	\$ <u>100.00</u>
Social security or other government assistance (Specify) _____	\$ <u>0.00</u>	\$ <u>0.00</u>
Pension or retirement income	\$ <u>0.00</u>	\$ <u>0.00</u>
Other monthly income (Specify) _____	\$ <u>0.00</u>	\$ <u>0.00</u>
TOTAL MONTHLY INCOME	\$ <u>1,804.00</u>	\$ <u>2,475.00</u>
TOTAL COMBINED MONTHLY INCOME \$ <u>4,279.00</u>	(Report also on Summary of Schedules)	

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document: **NONE**

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AMENDED SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse".

Rent or home mortgage payment (include lot rented for mobile home)		\$	1,168.00
Are real estate taxes included?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
Is property insurance included?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
Utilities Electricity and heating fuel		\$	125.00
Water and sewer		\$	70.00
Telephone		\$	50.00
Other		\$	0.00
Home Maintenance (Repairs and upkeep)		\$	25.00
Food		\$	425.00
Clothing		\$	60.00
Laundry and dry cleaning		\$	20.00
Medical and dental expenses		\$	211.00
Transportation (not including car payments)		\$	220.00
Recreation, clubs and entertainment, newspapers, magazines, etc.		\$	95.00
Charitable contributions		\$	0.00
Insurance (not deducted from wages or included in home mortgage payments)			
Homeowner's or renter's		\$	0.00
Life		\$	29.00
Health		\$	0.00
Auto		\$	55.00
Other		\$	0.00
Taxes (not deducted from wages or included in home mortgage payments)			
(Specify)		\$	0.00
Installment payments (In chapter 12 and 13 cases, do not list payments to be included in the plan)			
Auto		\$	0.00
Other		\$	0.00
Alimony, maintenance or support paid to others		\$	501.00
Payments for support of additional dependents not living at your home		\$	0.00
Regular expenses from operation of business, profession, or farm (attach detailed statement)		\$	965.00
Other Haircuts		\$	30.00

TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)

\$ 4,049.00

(FOR CHAPTER 12 AND 13 DEBTORS ONLY)

Provide the information requested below, including whether plan payments are to be made bi-weekly, monthly, annually, or at some other regular interval.

A. Total projected monthly income		\$	4,279.00
B. Total projected monthly expenses		\$	4,049.00
C. Excess income (A minus B)		\$	230.00
D. Total amount to be paid into plan each	Monthly (interval)	\$	230.00